| Application Number 10/695,928 | | | | | | Filed October 28, 2003 | |
|--|---|---------|-----------------------------|----------------------------|-----------------------------------|------------------------|-------------------|
| For WIRELESS NETWORK ACCESS | | | | | | | |
| Art Unit 2142 Examiner Lin, Kelvin Y. | | | | | | | Y. |
| This is a request under the provisions of 37 CFR 1. 136(a) to extend the period for filing a reply in the above identified | | | | | | | |
| application. | | | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | | |
| | | One mo | onth (37 CFR 1.17(a)(1)) | <u>Fee</u> \$120 | Small Entity Fee \$55 \$215 | | \$ |
| | | Two m | onths (37 CFR 1.17(a)(2)) | \$450 | | | ¢ |
| | \boxtimes | Three m | nonths (37 CFR 1.17(a)(3)) | | | | \$ |
| | | Four mo | onths (37 CFR 1. 1 7(a)(4)) | \$1020 | \$490 | 0 | \$ <u>1020.00</u> |
| | | | onths (37 CFR 1.17(a)(5)) | \$1590 | \$765 | | \$ |
| | | | | \$2160 | \$104 | 10 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | |
| | Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | |
| \Box | | | | | | | |
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| _ | | | | | | | |
| \boxtimes | | | | | | | |
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| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | |
| I am the applicant/inventor. | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number 48,958. attorney or agent under 37 CFR 1.34. | | | | | | | |
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| | | | | | | | |
| Registration number if acting under 37 CFR 1.34 | | | | | | | |
| | | | | | | | 1. 1. |
| Mobilities 12/12/06 | | | | | | | |
| Signature | | | | | | | afe (|
| _ | Carole A. Boelitz | | | | 425-722-6035 | | |
| Typed or printed name | | | | | Telephone Number | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
| Total of forms are submitted | | | | | | | |